INSTRUCTIONS: TYPE OR PRINT CLEARLY. It is mandatory to complete all items. Incomplete forms will be returned and could delay the issuance of your permit. Copy and attach additional pages if necessary. Each page must be signed and dated by the applicant. The animals listed on this inventory shall remain the property of the State of California through the Department of Fish and Game. The permittee shall be only granted custody of these animal(s). APPLICANT'S FIRST NAME M.I. LAST NAME **BUSINESS NAME (IF APPLICABLE)** LOCATION OF ANIMALS Note: Native species being held at multiple locations require veterinarian's certification that each of those facilities meet minimum housing requirements as set forth in Section 671.2, Title 14, of the California Code of Regulations. **ADDRESS** STATE ZIP CODE + 4 CITY ADDRESS STATE ZIP CODE + 4 CITY List all native animals in your possession or TO BE ACQUIRED in the following order: mammals, birds, fish, or reptiles. Group animals by order, family, and species. Use the following letters to denote sex: M=Male, F=Female, and U=Neutered or Unknown. Note: You must provide documentation of your experience and have housing built for all animals listed. List only those animals for which you have written documentation, from the licensed California Rehabilitation Facilities veterinarian, stating the animal to be acquired is nonreleasable and the reason why its nonreleasable. Contact the License and Revenue Branch at (916) 227-1305 if you need additional information. COMMON NAME SCIENTIFIC NAME SEX AGE NAME OF REHABILITATION **FACILITY AND DATE OBTAINED** I certify under penalty of perjury under the laws of the State of California that all information on this Native Species Inventory of Animals form is true and correct. I understand that false or incomplete information may result in denial or revocation of a permit and/or criminal prosecution. APPLICANT'S SIGNATURE (MUST BE IN INK) DATE

LAS 9133 FG 1313a (8/02)